

REQUIREMENTS FOR LICENSE - CONTRACTOR

RESPONSIBLE MANAGING EMPLOYEE

Access this form via website at: www.state.hi.us/dcca/pvl

Briefly, the requirements for a license are:

- 1) Be not less than 18 years of age;
- 2) Have a good reputation for honesty, truthfulness, financial integrity and fair dealing;
- 3) Have 4 years of supervisory experience within the past 10 years;
- 4) Pass an examination in the appropriate classification;
- 5) Have liability and worker's compensation insurance; and
- 6) If a corporation, partnership, joint venture, LLC or LLP, have in your employ a licensed individual who is designated Responsible Managing Employee (RME). If an RME, be employed by a licensed contracting entity.

This is the general licensure process and what you may expect after filing an application:

- 1) Applicant files application, fee and other required items by the **20th** day of the month.
- 2) Board reviews complete applications the following month.
- 3) Board notifies applicant of approval/disapproval/deferral.
- 4) Approved applicant registers with a separate testing agency for exam and pays testing agency exam fees.
- 5) Applicant takes exam the following month.
- 6) Upon passing the exam, board notifies individuals of license requirements.
- 7) Applicant submits license requirements.
- 8) Board issues license to applicant.
- 9) Maintain license.

APPLICATION FILING DEADLINE

Application, fee and all supporting documents to be presented to the board must be received in the board's Honolulu office on or before the 20th day of the month prior to the scheduled meeting date. The board is scheduled to meet once a month, except for the month of December. Refer to the attached "Annual Schedule" for all dates.

Filing an Application

There are 3 types of applications:

- 1) Sole Proprietor
- 2) Corporation, partnership, joint venture, LLC or LLP
- 3) RME

Each application must be accompanied with the following items for consideration by the board:

<u>Type of Application</u>	<u>Items Required</u>
1) Sole Proprietor	Application Fee Trade name registration, if applicable Experience certificates Financial statement Credit report Tax clearance
2) ENTITIES: Corporation, Partnership, Joint Venture, LLC or LLP	Application Fee Financial statement Credit reports of each officer/partner/manager/member and RME Tax clearance Trade name registration, if applicable RME appointment Entity registration
3) RME	Application Fee Experience certificates Credit report Entity appointment

Detailed instructions for submitting each of the items are on the next page. Submit all items listed for the type of application you will be filing. **FAX COPIES WILL NOT BE ACCEPTED.**

INSTRUCTIONS FOR FILING

APPLICATION

Complete all 4 pages of the application.

An entity, corporation, partnership, joint venture, LLC or LLP cannot be issued a license without having in its employ a principal responsible managing employee (RME). The corporation, partnership, joint venture, LLC or LLP must file a separate application from a RME and both must pay separate fees in order to be licensed.

FEES

Attach the \$50 application fee which is not refundable for each application filed. Additional fees will be assessed after board approval and passage of the examination. Make checks payable to: COMMERCE AND CONSUMER AFFAIRS.

Note: *One of the numerous legal requirements that you must meet in order for your new license to issue is the payment of fees as set forth in this application. You may be sent a license certificate before the check you sent us for your required fees clears your bank. If your check is returned to us unpaid, you will have failed to pay the required licensing fee and your license will not be valid, and you **may not** do business under that license. Also, a \$15.00 service fee will be charged for checks which are returned by the bank.*

If for any reason you are denied the license you are applying for, you may be entitled to a hearing as provided by Title 16, Chapter 201, Hawaii Administrative Rules, and/or Chapter 91 Hawaii Revised Statutes. Your written request for a hearing must be directed to the agency that denied your application, and must be made within 60 days of notification that your application for a license has been denied.

EXPERIENCE

Submit not less than 3 certificates in support of supervisory experience with application. (No two certificates shall be from the same person.) All certificates must be notarized.

A minimum of 4 years of full-time supervisory experience within the past 10 years immediately preceding the filing of an application is required.

Applicants who possess licensed experience in another state should provide proof of licensure, but will still be required to submit not less than 3 certificates in support of supervisory experience.

Certain technical training or business administration training may be approved as acceptable experience, but in no case shall the training count for more than one year of experience.

ASBESTOS CONTRACTOR

Contracting entities applying to do asbestos application, enclosure, removal, encapsulation, renovation, repair demolition or other disturbances of friable asbestos or asbestos containing material shall meet all requirements with the exception of experience.

In lieu of experience, the contracting entity (individual, corporation, partnership, joint venture, LLC or LLP) shall submit proof of successful completion by the applicant, RME and all asbestos abatement employees of the contracting entity of Environmental Protection Agency (EPA) or board approved courses. Individuals or RMEs shall have taken a 4-day course; abatement workers shall have taken a 3-day course within two years prior to filing the application.

FINANCIAL STATEMENT

Submit a current financial statement (not more than a year old) prepared and signed by a registered or certified public accountant holding a current permit to practice. If licensed in another state, **provide copy of license**.

SIGNATURE OF APPLICANT IS REQUIRED ON FINANCIAL STATEMENT, WHETHER ACCOUNTANT USES OUR FORM OR THEIR OWN.

CREDIT REPORT

Submit a **current** credit report for each officer, partner, manager, member and RME (from a credit reporting agency **issued not more than 6 months ago**) covering at least the previous 5 years. Out-of-state applicants may apply for a credit report from a retail credit bureau in their area.

TAX CLEARANCE

Submit a **current** Hawaii State Tax Clearance (**not more than 6 months old**) with an original Department of Taxation stamp. *(Not applicable to people residing in Hawaii less than 1 year and not applicable to corporations, partnerships, LLCs or LLPs registered in Hawaii less than 1 year).*

TRADE NAME

If you are planning to use a trade name, submit a filed-stamped copy of current trade name registration approved by the Business Registration Division of the Department of Commerce and Consumer Affairs.

**ENTITY REGISTRATION:
CORPORATION/PARTNERSHIP
LLC or LLP**

If the application is for a corporation, partnership, LLC or LLP we will require the following proof to show that the entity is properly registered with the Business Registration Division (BREG), Department of Commerce and Consumer Affairs, State of Hawaii, P. O. Box 40, Honolulu, 96810. *(Please call them for the proper forms at: (808) 586-2727) or visit their website at: www.businessregistrations.com/home.html to order Certificates of Good Standing, forms, etc.*

If the entity has been registered in this state for LESS THAN ONE (1) YEAR, ATTACH a "filed-stamped" copy of the document filed with BREG; or the same certificate mentioned below.

If the entity has been registered in this state for MORE THAN ONE (1) YEAR, ATTACH a current "Certificate of Good Standing" or "Certificate of Qualification" issued not more than 1 year ago.

RME/ENTITY APPOINTMENT

RME not licensed in Hawaii: File a separate application as a RME. If entity is already licensed, entity must submit a letter confirming RME employment.

RME licensed in Hawaii: Have RME submit a letter confirming employment with new entity and confirming termination of present status. If the new entity does not request to be licensed with **all** of your active classes, they will be placed on inactive status.

Sole proprietor licensed in Hawaii and incorporating, forming a partnership, LLC or LLP: When a licensed individual changes to a partnership, incorporates, or forms a LLC or LLP, submit a letter with the application stating change in status from sole proprietor to RME of new entity.

LAWS AND RULES

A copy of the Contractors laws and rules may be obtained for \$2.00 from: CASHIER, DCCA, P.O. Box 541, Honolulu, Hawaii 96809. *(Price subject to change without notice.) Chapter 436B, Hawaii Revised Statutes, the Professional and Vocational Licensing Law may be purchased separately for 75¢.*

The LAWS and RULES are posted on our website at: www.state.hi.us/dcca. Look under "Obtaining Information".

BOARD'S ADDRESS

Mail the completed application, proper fee amount and other required documents to:

Contractors License Board
DCCA, PVL Licensing Branch
P.O. Box 3469
Honolulu, HI 96801

Deliver to office location at:
1010 Richards St., 1st Floor
Honolulu, HI 96813
Phone: (808) 586-3000

VISIT OUR WEBSITE AT: www.state.hi.us/dcca/pvl

EXAMINATION

The contractors licensing examinations are administered by a professional testing service, Experior Assessments, LLC (FKA NAI□Block).

Applicants, upon approval by the board, will be provided with examination registration forms. Applicants must mail the registration forms, together with the appropriate examination fees, directly to Experior. *Phone:* (808) 261-8182.

Applicant must pass a written examination covering the following:

PART I Business and law (A copy of the Contractors laws and rules may be purchased for \$2.00 from: CASHIER, DCCA, P.O. Box 541, Honolulu, HI 96809). *(Price subject to change without notice.)*

NOTE: It is strongly suggested that applicants purchase a copy of contractor licensing law and rules.

PART II Trade (field knowledge in classification requested).

Recommended Study materials for the Part II examination may be obtained by calling Experior - (808) 261-8182.

Some books are available at public libraries. Refer to the listing in the "*Bulletin of Examination Information.*"

Questions regarding the examination and study material should be directed to the testing agency, Experior. *Phone:* (808) 261-8182.

CONTRACTORS EXAM/BOARD MEETING SCHEDULE - 2003

<u>Application Filing Deadline</u>	<u>Board Meeting</u>	<u>Experior Filing Deadline</u>	<u>Experior Examination Dates</u>
NO BOARD MEETING IN DECEMBER		January 3, 2003	January 16**, 17*, 2003
December 20, 2002	January 17, 2003	February 7, 2003	February 20**, 21*, 2003
January 20, 2003	February 21, 2003	March 7, 2003	March 20**, 21*, 2003
February 20, 2003	March 21, 2003	April 4, 2003	April 17**, 18*, 2003
March 20, 2003	April 25, 2003	May 9, 2003	May 22**, 23*, 2003
April 20, 2003	May 23, 2003	June 6, 2003	June 19**, 20*, 2003
May 20, 2003	June 20, 2003	July 4, 2003	July 17**, 18*, 2003
June 20, 2003	July 18, 2003	August 1, 2003	August 14**, 15*, 2003
July 20, 2003	August 22, 2003	September 5, 2003	September 18**, 19*, 2003
August 20, 2003	September 19, 2003	October 3, 2003	October 16**, 17*, 2003
September 20, 2003	October 24, 2003	November 7, 2003	November 20**, 21*, 2003
October 20, 2003	November 21, 2003	December 5, 2003	December 18**, 19*, 2003
NO BOARD MEETING IN DECEMBER		(Not available)	

*All Islands (includes Oahu)

**Oahu only

CLASSIFICATIONS AS LISTED IN CHAPTER 77

HAWAII ADMINISTRATIVE RULES

"A"	General Engineering
"B"	General Building
C-1	Acoustical and insulation contractor;
C-2	Mechanical insulation contractor;
C-3	Asphalt paving and surfacing contractor;
C-3a	Asphalt concrete patching, sealing, and striping contractor;
C-3b	Play court surfacing contractor;
C-4	Boiler, hot-water heating, and steam fitting contractor;
C-5	Cabinet, millwork, and carpentry remodeling and repairs contractor;
C-5a	Garage door contractor;
C-5b	Siding application contractor;
C-6	Carpentry framing contractor;
C-7	Carpet laying contractor;
C-9	Cesspool contractor;
C-12	Drywall contractor;
C-13	Electrical contractor;
C-14	Sign contractor;
C-15	Electronic systems contractor;
C-15a	Fire and burglar alarm contractor;
C-16	Elevator contractor;
C-16a	Conveyor systems contractor;
C-17	Excavating, grading, and trenching contractor;
C-19	Asbestos contractor;
C-20	Fire protection contractor;
C-20a	Dry chemical fire repressant systems contractor;
C-21	Flooring contractor;
C-22	Glazing and tinting contractor;
C-22a	Glass tinting contractor;
C-23	Gunite contractor;
C-24	Building moving and wrecking contractor;
C-25	Institutional and commercial equipment contractor;
C-27	Landscaping contractor;
C-27a	Hydro mulching contractor;
C-27b	Tree trimming and removal contractor;
C-31	Masonry contractor;
C-31a	Cement concrete contractor;
C-31b	Stone masonry contractor;
C-31c	Refractory contractor;
C-31d	Tuckpointing and caulking contractor;
C-31e	Concrete cutting, drilling, sawing, coring, and pressure grouting contractor;
C-32	Ornamental, guardrail, and fencing contractor;
C-33	Painting and decorating contractor;
C-33a	Wall coverings contractor;
C-33b	Taping contractor;
C-33c	Surface treatment contractor;
C-34	Soil stabilization contractor;
C-35	Pile driving, pile and caisson drilling, and foundation contractor;
C-36	Plastering contractor;
C-36a	Lathing contractor;
C-37	Plumbing contractor;
C-37a	Sewer and drain line contractor;
C-37b	Irrigation and lawn sprinkler systems contractor;
C-37c	Vacuum and air systems contractor;
C-37d	Water chlorination contractor;

C-37e	Treatment and pumping facilities contractor;
C-37f	Fuel dispensing contractor;
C-38	Post tensioning contractor;
C-40	Refrigeration contractor;
C-40a	Prefabricated refrigerator panels contractor;
C-41	Reinforcing steel contractor;
C-42	Roofing contractor;
C-42a	Aluminum shingles contractor;
C-42b	Wood shingles and shakes contractor;
C-42c	Cement and clay tile contractor;
C-42d	Composition shingle contractor;
C-42e	Urethane foam contractor;
C-42f	Liquid asphalt roofing contractor;
C-42g	Roof coatings contractor;
C-43	Sewer, sewage disposal, drain, and pipe laying contractor;
C-43a	Reconditioning and repairing pipeline contractor;
C-44	Sheet metal contractor;
C-44a	Gutters contractor;
C-44b	Awnings and patio cover contractor;
C-48	Structural steel contractor;
C-48a	Steel door contractor;
C-49	Swimming pool contractor;
C-49a	Swimming pool service contractor;
C-49b	Hot tub and pool contractor;
C-51	Tile contractor;
C-51a	Cultured marble contractor;
C-51b	Terrazo contractor;
C-52	Ventilating and air conditioning contractor;
C-55	Waterproofing contractor;
C-56	Welding contractor;
C-57	Well drilling contractor;
C-57a	Pumps installation contractor;
C-57b	Injection well contractor;
C-61	Solar energy systems contractor;
C-61a	Solar hot water systems contractor;
C-61b	Solar heating and cooling systems contractor;
C-62	Pole and line contractor; and
C-68	Classified specialist.

LICENSE REQUIREMENTS
Upon Passing the Exam (Individual) or Receiving Board Approval
(Corporation/Partnership/LLC/LLP)

**WORKER'S COMPENSATION
INSURANCE**

Worker's Compensation - Submit a certificate of worker's compensation insurance from an insurance company authorized to do business in this State, and a statement from the insurance carrier that the board will be notified of any withdrawal, termination, or cancellation of the insurance.

Sole proprietor or partnership with **NO** employees may file a form prescribed by the board, in lieu of worker's compensation insurance.

LLC's with no employees may file written verification of exclusion from the State Dept of Labor and Industrial Relations in lieu of workers' compensation insurance.

Corporations may file a form prescribed by the board in lieu of worker's compensation insurance WHEN the RME owns at least 50% of the corporation and there are NO OTHER EMPLOYEES.

Joint Ventures must file worker's compensation certificates.

**LIABILITY AND PROPERTY
DAMAGE INSURANCE**

Submit a certificate of insurance from an insurance company or agency authorized to do business in this State, showing full policy coverage of the applicant for comprehensive personal injury and property damage liability with the following minimum limits of liability:

Bodily Injury Liability	\$100,000	each person
	\$300,000	each occurrence

Property Damage Liability	\$50,000	each occurrence
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PLACE OF BUSINESS

A licensed contractor shall have and maintain a definite place of business where the licensee may be served notice and legal process in the State and shall display therein his contractor's license. Post Office Box number is not accepted as a place of business.

FEES

License fees will be due. Specific amounts will be given at the appropriate time.

ENTITY-RME DEPENDENCY

A corporation, partnership, joint venture, LLC or LLP cannot be issued a license without having in its employ a responsible managing employee (RME). The entity must file a separate application from a RME and both must pay separate fees in order to be licensed.

MAINTAINING THE LICENSE

MAINTAIN INSURANCE

Maintain insurance coverage throughout licensure and keep on file in the board's office evidence of such coverage.

Failure to maintain liability property damage and worker's compensation coverages causes automatic forfeiture of license, and if not reinstated within sixty days, shall require the person/entity to apply as a new applicant.

ENTITY-RME DEPENDENCY

If for any reason the Responsible Managing Employee leaves the contracting entity, the contracting entity must notify the board and file an application for a new RME within 30 days of RME leaving contracting entity. Failure to notify the board and apply for a new RME within 30 days causes the license to be **FORFEITED** automatically.

RMEs who leave an entity shall within 60 days apply to become a contracting entity, obtain employment with another contracting entity or instruct the board to place the license on an inactive status. Failure to do so within 60 days will cause **automatic forfeiture** of the license.

(continued)

PLACE OF BUSINESS

Maintain a place of business.

BIENNIAL RENEWAL

All licenses, regardless of issuance date, are subject to renewal by **September 30 of each even-numbered year**. To ensure receipt of a renewal application, keep the board informed of your address. Applications are sent by mail around August 15, even-numbered years. Licenses not renewed by September 30 are forfeited and the holders of a forfeited license are considered unlicensed and may not practice. Restorations of forfeited licenses are accepted until November 30 with a penalty fee also due. After November 30, restoration is not accepted and a new application for a license is required.

APPLICATION FOR CONTRACTOR'S LICENSEAccess this form via website at: www.state.hi.us/dcca/pvlSTATE OF HAWAII
DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS**CONTRACTORS LICENSE BOARD**1010 RICHARDS STREET, P.O. BOX 3469
HONOLULU, HAWAII 96801**INSTRUCTIONS - To avoid delay read all instructions carefully.****Each** applicable question must be fully and truthfully answered. **Any material misrepresentation is grounds for refusal or subsequent revocation of license.**

Attach sheets to this application when so instructed or where the space provided for the answer is not sufficient.

Answer all questions. **No license will be considered until this application is completed.** If a question is not applicable, indicate with "NA."Applications must be **printed** in **black ink** or **typewritten**.The required **\$50.00 application fee** must be attached and submitted with this application form.

FOR BOARD USE ONLY

Lic. No.

Eff. Date:

CLASS(ES):

(A) Indicate the type of application being made:

- ☐ Responsible Managing Employee (RME) for: (Name of Firm) _____
- ☐ Individual (sole owner) Mailing Address: _____
- ☐ Corporation _____
- ☐ Partnership _____
- ☐ Joint Venture _____
- ☐ LLC _____
- ☐ LLP _____

(B) Name of Applicant _____
(Give name of person, corporation, partnership, joint venture, LLC or LLP)

(C) Trade Name or Business Name (if any) _____

(D) Social Security No. _____ Phone (days): _____

(E) • Mailing Address _____
(Street address or P. O. Box, City, State, Zip Code)• Hawaii Business Address _____
(Street address, City, Zip Code)(F) PERSONNEL OF APPLICANT - If applicant is:

- an INDIVIDUAL
- a CORPORATION
- a LIMITED LIABILITY COMPANY (LLC)
- a PARTNERSHIP/JOINT VENTURE/LLP
- a RME

Provide information on:

- the INDIVIDUAL
- all the OFFICERS **and** the RME
- all the MANAGERS/MEMBERS **and** the RME
- all the PARTNERS **and** the RME
- the RME

Full Name (First-Middle-Last)	Title or Position	Residence Address (Give <u>Location</u> . P.O. Box not acceptable.)

(G) Set forth in detail the kind of contracting business in which the applicant intends to engage _____

(H) Classification requested (_____) _____
Symbol - See list attached Name of classification

Appl 115 \$ 50

Entity: Lic 116 \$200

RF 908 \$150

EF 909 \$ 10

CRF 117 \$ 55/\$110

1/2 Ren 100 \$ 75

RME: Lic 116 \$200

CRF 117 \$ 55/\$110

1/2 Ren 100 \$ 25

Service fee BCF \$ 15

Name of Applicant: _____
(LAST, First, MI or Name of Corporation, Partnership, Joint Venture, LLC or LLP)

(I) **EACH QUESTION MUST BE ANSWERED**

1. (a) State the date and the name of the entity under which the applicant first started in the business of contracting in the State of Hawaii. _____
(b) Have you ever applied for a Hawaii State contractor's license? If yes, state month and year _____
2. Provide name, classification, number, date and copy of each contractor's license previously held in any State by any person listed under "*Personnel of Applicant*" or held by any organization in which any such person was a copartner or corporate officer, manager, or member. _____
3. Give name, dates of attendance and copy of any technical training, college degree or business administration training. _____
4. Has any person listed under "*Personnel of Applicant*" been affiliated with a contracting entity whose license has been terminated due to issuance of a court order authorizing payment from the Contractors Recovery Fund of their state or any other state? _____
If yes, submit a detailed statement giving the date of the order and circumstances leading up to issuance of the court order.
5. Has any person listed under "*Personnel of Applicant*" or has any construction organization in which any such person was a member of the personnel, had a contractor's license or any professional or vocational license denied, fined, suspended or revoked by this State or any other State? _____ If yes, attach a detailed statement.
(For the purpose of this question, "denied" does not mean that one has previously failed an examination.)
6. Has any bonding or surety company ever completed or made a financial settlement upon any construction contract or work undertaken by any person listed under "*Personnel of Applicant*" or any construction organization in which any such person was a member of the personnel? _____ If yes, attach a detailed statement.
7. Are there now any unpaid past due bills or claims for labor, materials, or services, outstanding and unsatisfied, as a result of the operations of any person listed under "*Personnel of Applicant*" or any construction organization in which any such person was a member of the personnel? _____ If yes, attach a detailed statement.
8. Are there now any liens, suits, or judgments of record or pending, outstanding and unsatisfied, as a result of the operations of any person listed under "*Personnel of Applicant*" or any construction organization in which any such person was a member of the personnel? _____ If yes, attach a detailed statement.
9. Has any person listed under "*Personnel of Applicant*" or has any construction organization in which any such person was a member of the personnel ever been adjudicated as bankrupt; or is any person listed under "*Personnel of Applicant*" or any construction organization in which any such person is a member of the personnel, presently in the process of bankruptcy proceedings? _____ If yes, attach a detailed statement giving the number of bankruptcy proceedings, the location of the bankruptcy court, a schedule of creditors listed in the bankruptcy petition, the approximate date of the action and a statement of the final action upon the proceedings.
10. Has any person listed under "*Personnel of Applicant*" or has any construction organization in which any such person was a member of the personnel ever made an assignment of assets, either voluntary or otherwise, in settlement of construction obligations for less than the total amount of the indebtedness? _____ If yes, attach a detailed statement listing names and addresses of all creditors and losses they sustained.
11. Has any person listed under "*Personnel of Applicant*" ever been convicted of a felony within the last 5 years? _____
If yes, attach a detailed statement.
12. If applicant intends to do business as a corporation, partnership, joint venture, LLC or LLP has it been approved by the Business Registration Division, Department of Commerce and Consumer Affairs? _____
13. If using a trade name, have you registered the trade with the Business Registration Division, Department of Commerce and Consumer Affairs? _____

(J) EDUCATION: Vocational school, college, university, special training

yrs.

mos.

(K) EXPERIENCE STATEMENT

- 1) TYPE OF WORK & TIME AT EACH-I have worked as a:
- | | | | |
|--------------------------|---------------------------|------------|------------|
| <input type="checkbox"/> | Apprentice for | _____ yrs. | _____ mos. |
| <input type="checkbox"/> | Journeyman for | _____ yrs. | _____ mos. |
| <input type="checkbox"/> | Supervisor for | _____ yrs. | _____ mos. |
| <input type="checkbox"/> | Superintendent for | _____ yrs. | _____ mos. |
| <input type="checkbox"/> | Contractor for | _____ yrs. | _____ mos. |
| <input type="checkbox"/> | Foreman for | _____ yrs. | _____ mos. |
| <input type="checkbox"/> | Project Manager for | _____ yrs. | _____ mos. |
- _____ for _____ yrs. _____ mos.
- 2) TOTAL TIME IN CONSTRUCTION: _____ yrs. _____ mos.

3) **SKILLS** - I can perform the following:

- | | |
|--------------------------|---------------------------------------|
| <input type="checkbox"/> | Read a financial statement |
| <input type="checkbox"/> | Compute payroll |
| <input type="checkbox"/> | Balance a checking account |
| <input type="checkbox"/> | Read blueprints |
| <input type="checkbox"/> | Prepare job estimates |
| <input type="checkbox"/> | Order materials |
| <input type="checkbox"/> | Design & layout construction projects |
| <input type="checkbox"/> | Other (specify): _____ |
| <input type="checkbox"/> | Other (specify): _____ |

4) LIST THE MOST RECENT EXPERIENCE FIRST:

_____	_____
<i>Name of Company</i>	<i>License No.</i>

<i>Type of Business Company Engaged in</i>	

<i>Address of Company</i>	
Dates employed: _____ to _____	Total: _____
Mo/Yr Mo/Yr	Yr/Mo
Dates supervised: _____ to _____	Total: _____
Mo/Yr Mo/Yr	Yr/Mo
No. of people supervised: _____	
TYPE OF PROJECTS:	
<input type="checkbox"/> Apartments	<input type="checkbox"/> Office Buildings
<input type="checkbox"/> Condominiums	<input type="checkbox"/> Remodeling
<input type="checkbox"/> Custom	<input type="checkbox"/> Tract Houses
<input type="checkbox"/> High Rise	<input type="checkbox"/> Other (specify): _____

Describe duties and responsibilities:

Hours worked per week: _____

AVERAGE SIZE OF COMPLETED PROJECTS (Give square footage or anything that will describe physical dimension):

AVERAGE GROSS DOLLAR VALUE OF COMPLETED PROJECTS:
\$ _____

_____	_____
<i>Name of Company</i>	<i>License No.</i>

<i>Type of Business Company Engaged in</i>	

<i>Address of Company</i>	
Dates employed: _____ to _____	Total: _____
Mo/Yr Mo/Yr	Yr/Mo
Dates supervised: _____ to _____	Total: _____
Mo/Yr Mo/Yr	Yr/Mo
No. of people supervised: _____	
TYPE OF PROJECTS:	
<input type="checkbox"/> Apartments	<input type="checkbox"/> Office Buildings
<input type="checkbox"/> Condominiums	<input type="checkbox"/> Remodeling
<input type="checkbox"/> Custom	<input type="checkbox"/> Tract Houses
<input type="checkbox"/> High Rise	<input type="checkbox"/> Other (specify): _____

Describe duties and responsibilities:

Hours worked per week: _____

AVERAGE SIZE OF COMPLETED PROJECTS (Give square footage or anything that will describe physical dimension):

AVERAGE GROSS DOLLAR VALUE OF COMPLETED PROJECTS:
\$ _____

_____	_____
<i>Name of Company</i>	<i>License No.</i>

<i>Type of Business Company Engaged in</i>	

<i>Address of Company</i>	
Dates employed: _____ to _____	Total: _____
Mo/Yr Mo/Yr	Yr/Mo
Dates supervised: _____ to _____	Total: _____
Mo/Yr Mo/Yr	Yr/Mo
No. of people supervised: _____	
TYPE OF PROJECTS:	
<input type="checkbox"/> Apartments	<input type="checkbox"/> Office Buildings
<input type="checkbox"/> Condominiums	<input type="checkbox"/> Remodeling
<input type="checkbox"/> Custom	<input type="checkbox"/> Tract Houses
<input type="checkbox"/> High Rise	<input type="checkbox"/> Other (specify): _____

Describe duties and responsibilities:

Hours worked per week: _____

AVERAGE SIZE OF COMPLETED PROJECTS (Give square footage or anything that will describe physical dimension):

AVERAGE GROSS DOLLAR VALUE OF COMPLETED PROJECTS:
\$ _____

ATTACH ADDITIONAL SHEETS IF NECESSARY

SIGNATURE IS REQUIRED ON NEXT PAGE

Name of Applicant: _____
(LAST, First, MI or Name of Corporation, Partnership, Joint Venture, LLC, or LLP)

Any material misrepresentation made in this application is grounds for refusal or subsequent revocation of a license.

The undersigned hereby applies for license pursuant to the provisions of Chapter 444, Hawaii Revised Statutes and vouches for the truth and accuracy of all statements, answers and representations made in this application, including all supplementary statements hereto attached.

Owner, partner, officer of a
corporation, manager or member of
LLC, responsible managing employee

Date

Signature

Title_____

Date

Signature

Title_____

Date

Signature

Title_____

Date

Signature

Title_____

This material can be made available for individuals with special needs. Please call the Licensing Branch Manager at (808) 586-3000 to submit your request.

Supporting certificates necessary to establish that the applicant's construction experience meets the minimum requirements must be attached to the application -- See instruction sheet.

Additional certificate forms may be obtained from the office of the Board, 1010 Richards Street, Honolulu, HI 96813.

IMPORTANT! READ THE INFORMATION ON THE REVERSE SIDE OF THIS FORM BEFORE COMPLETING THIS CERTIFICATE.

THIS BLOCK TO BE COMPLETED BY THE APPLICANT:

THIS SECTION TO BE COMPLETED BY THE PERSON WHO WILL CERTIFY TO THE APPLICANT'S EXPERIENCE:

DESCRIBE IN DETAIL THE TYPE OF SUPERVISORY WORK PERFORMED BY THE APPLICANT:

Section 444-30, HRS, of the contractors license law provides that: Any person or his agent who files with the Contractors License Board any notice, statement, or other document required under the provisions of the contractors license law, which is false or untrue or contains any material misstatement of fact is guilty of a misdemeanor.

Business Phone No. ()

COMPLETION OF THIS EXPERIENCE CERTIFICATION

The applicant must detail four full years of supervisory experience within the past 10 years, in the classification the applicant is applying for, at the level of a Journeyman, Foreman, Supervisor, or Contractor (see definitions below). The applicant must also submit certificates to support this experience. The certificates must be completed by a qualified and responsible person; that is, by an employer, fellow employee, or journeyman who has DIRECT KNOWLEDGE of the applicant's experience.

DIRECT KNOWLEDGE is knowledge of the truth in regard to a particular fact, which is original, and does not depend on information or hearsay.

The applicant is requesting that you complete this form to certify as to your DIRECT KNOWLEDGE of the applicant's experience. As a qualified and responsible person you must certify that the applicant demonstrated a level of knowledge and skill expected of a journeyman or better in the classification for which the application is being made.

JOURNEYMAN is an experienced worker in the trade who is fully qualified as opposed to a trainee, and is able to perform the trade without supervision.

FOREMAN/SUPERVISOR is a person who has the knowledge and skill of a journeyman and also directly supervises the physical construction.

CONTRACTOR is one or more of the following:

- 1) a currently licensed Hawaii contractor
- 2) a formerly licensed Hawaii contractor
- 3) a person listed under "*Personnel of Record*" on the license application of a currently licensed Hawaii contractor
- 4) an out-of-state contractor who held a license in that state

A Contractor is a person who has the skills necessary to manage the daily activities of a construction business, including field supervision.

Your cooperation is earnestly solicited so that the Contractors License Board can determine whether this applicant has the experience necessary to become a capable and qualified contractor.

IMPORTANT: You may be requested to provide documentation to verify all experience to which you are attesting. For your records, it is suggested that you keep a copy of the certificate you complete.

DO NOT SEND THIS FORM TO THE CONTRACTORS LICENSE BOARD. INSTEAD, RETURN IT TO THE APPLICANT SO THE APPLICANT MAY ATTACH IT TO THE APPLICATION.

IMPORTANT! READ THE INFORMATION ON THE REVERSE SIDE OF THIS FORM BEFORE COMPLETING THIS CERTIFICATE.

THIS BLOCK TO BE COMPLETED BY THE APPLICANT:

THIS SECTION TO BE COMPLETED BY THE PERSON WHO WILL CERTIFY TO THE APPLICANT'S EXPERIENCE:

DESCRIBE IN DETAIL THE TYPE OF SUPERVISORY WORK PERFORMED BY THE APPLICANT:

Certification of Person Completing this Form:

Business Phone No. ()

COMPLETION OF THIS EXPERIENCE CERTIFICATION

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